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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

Division of Co			•
SUBJECT: RUSI	NESS RISK MON	AGEMENT SERVIC	CES, LLC
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	RICHARD J. X	Name of Person)	
<u> </u>	BUSINESS lus	Firm/Company) RANCE SERVI (Firm/Company) (Address)	CES, INC.
	1265 S. Semok	PAN BLUD., SUI	T 1248
	WINTER PARK, (City	FLA 32792	
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
RICHARD	J. RANDALL	at (<u>407</u>) <u>667</u> (Area Code & Daytime To	<i>- 4877</i>
(Name	of Person)	(Area Code & Daytime 1	elephone Number)
Enclosed is a check for	or the following amount:		
☐ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:		
BUSINESS RISK MANAGE (Must end with the words "Limited Liability Company, "Li	ENENT SERVICE . imited Company" or their abbrevia	5 Ition "LLC," or "L.C.,")	DIVISION OF 2
ARTICLE II - Address:			- 67
The mailing address and street address of the	principal office of the Li	mited Liability Con	npandy is
Principal Office Address:	Mailing Address:	·	STATIONS RATIONS 9: 50
1265 S. SEMBRAN BLYD.	1265 5. SEMORI	AN BLYO.	Q.
Suit 1248	SUITE IZYA		
1265 S. SEMBRAN BLYD, SUITE 1248 WINTER PARK, FL 32792	WINTER PARK	FL 32792	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)			
The name and the Florida street address of th	ne registered agent are:		A.
	RANDALL	_	Mario Constitution of the
	address (P.O. Box NOT accep	,	
WINTER PARK	FL 32792 te, and Zip	<u> </u>	
City, Stat	te, and Zip		
Having been named as registered agent and liability company at the place designated i			

registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGR	RICHARD V. RANDALL 1265 S. SEMBRAN BLVD., SUITE WINTER THRK, FL 31792
·····	
(Use attachment if necessary)	
	must be specific and cannot be more than five business da
ffective date is listed, the date	
CLE V: Effective date, if other ffective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE:	
ffective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE:	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2